



NEWHAVEN URBAN DISTRICT COUNCIL

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the

YEAR ENDED 31st DECEMBER, 1955

Public Health Department,
Lewes House,
High Street,
LEWES,
Sussex.

September, 1956

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Lewes House,
LEWES, Sussex.

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To the Chairman and Members of the Public Health
and Housing Committee, Newhaven Urban District
Council.

Mr Chairman, Ladies and Gentlemen,

I have pleasure in submitting the Annual Report for 1955 on the state of public health of the general population and the sanitary circumstances of Newhaven.

In this preface a few simple facts about Newhaven may not be amiss. Tedious and laborious details tend to obscure essentialities. These details have been sacrificed and an attempt has been made to present the essential truth in a broad picture.

Newhaven facing south is situated at the foot of the South Downs. The town is sheltered on the north and east by the downland hills. The subsoil is of chalk and flints and the climate is generally dry, very sunny and bracing. The rainfall is light averaging about 25 inches annually. In a period of ten successive years the average annual hours of sunshine was 1,735 hours. The number of sunny days in 1939 was 297 out of the 365. The maximum temperature varies from about 40 degrees Fahrenheit in February to as high as 88 degrees in July and August. There are occasional south-west gales for short periods during some months of the winter and the town is protected by the downland hills from the cold spring winds.

Newhaven is connected with shipping and industry. The majority of the industries are light ones. Only one industry can be said to approach the heavy classification. With the absence of heavy industries the clear atmosphere is not polluted by smoke or fumes.

The population of the town is the youngest in Sussex. According to the 1951 Census Report the percentage of Newhaven people between 15 years and 64 years was 66.4% and no less than 63% was under 45 years of age. The percentage of those of 65 years and over was 11.4%, the lowest in Sussex. Other coastal towns in Sussex had less than 50% of their population under 45 years and over 20% aged 65 years and over. The great majority of the inhabitants of Newhaven live well beyond the allotted span.

Infants born of Newhaven residents and brought up in the town thrive well. During the last ten years the infantile mortality rate (i.e. the deaths of infants under one year of age per 1,000 live births) was less than half the rate for England and Wales for the same period.

It is very seldom that a Newhaven mother dies in or in consequence of childbirth. There has been only one such fatality of a Newhaven mother during the last twenty years. This represents a maternal death rate of less than one sixth of the rate for England and Wales for the same period.

The general death rate is usually lower and the birth rate usually higher in Newhaven than the corresponding rates for England and Wales when fair comparisons are made. In recent years the annual death rates have decreased throughout the whole country. This has

been due to the use of antibiotics and other drugs in the treatment of illnesses which in former times proved fatal in many cases. Improved nutrition of the general population has helped individuals to resist infections. There has been more sobriety and less over-indulgence in food for some years now and both have cut the death rates. Improved surgical and medical techniques have saved many lives which would have been lost without such improved methods. These causes of the fall in the death rates throughout the country have applied to the fall of Newhaven's death rates also. The average Newhavenite usually comes from tough and long living stock, hence the fact that most survive beyond the allotted span.

One can predict with a certain amount of surety that generally death rates will decline still further. As the length of life is increasing as time goes on there will be a greater proportion of old people in a community and a certain but small gain in a population thereby. Predicting future birth rates is a most uncertain venture since there are so many variables and imponderables such as future economic conditions, the cost of living, the success or otherwise of this country in being able to supply goods to other countries at competitive prices, the extent of employment or unemployment in this country, also the prevailing idea of what size a family should be. The widespread fear of another war would most likely act as a factor in decreasing the birth rate.

In the later years of the last war and in the immediate post war years the annual birth rates in Newhaven were amongst the highest in Sussex. The death rates remained comparatively low. The annual birth rates are now declining although they are still amongst the highest in the country, whilst the annual death rates relating to Newhaven residents continue at a low level.

It has been stated in previous Annual Reports that over many years the gain in the population of Newhaven obtained by the excess of births over deaths was diminished by Newhaven born young adults leaving the town in considerable numbers to seek employment and residence elsewhere. This assumption, and it was nothing more, was borne out as more than an assumption and revealed as a fact on perusal of the Registrar General's Census Reports for 1931 and 1951. The census population of Newhaven in 1931 was 7,381, whilst that for 1951 was 7,785 giving a gain in population of 404. The excess of births over deaths during the 1931 - 51 period was 666. Disregarding any increase of population due to immigration into the town by people from other areas as the amount was small in that period, it appears that about half the gain obtained by excess of births over deaths was lost to the population by emigration of the Newhaven-born to places elsewhere. One cannot expect every individual born in a town to stay in it permanently or until past young adulthood. Nevertheless such a loss of young people as has been described is unfortunate. Withal, Newhaven still has the youngest population in Sussex although this is partly due to it not being mostly residential in character.

Recent surveys by mass radiography have indicated that the proportion of tuberculosis cases in Newhaven was somewhat below the average found throughout the country by similar surveys.

In common with other parts of the country the numbers of cases of infectious diseases in Newhaven have diminished in recent years. Diphtheria has been wiped out by immunisation and the last case of this disease was notified eight years ago. Other infectious diseases have been still with us and there is no need for any complacency over the situation, improved though it is over that of former years. Diseases such as scarlet fever which in the past led to a good deal of disablement and a fairly high death rate are now in some cases much milder (scarlet fever certainly is) and cause little or no disablement and a lesser death rate. Nevertheless, throughout the country it has been found recently that as the incidences of bacillary infectious diseases have diminished

other infectious diseases of viral origin are taking their places. Not so long ago there was an epidemic of virus pneumonia in a London district involving a considerable proportion of the population and a strange viral infection in North Cornwall, the cause of which so far is not fully elucidated, which latter infection caused a high temperature, sickness and vomiting and general weakness. Cases so stricken took a long time to recover.

As to the vital statistics relating to Newhaven for the year 1955, these will be brief. The estimated population for the year was 7,980. This is the highest population ever recorded of the town. The birth rate was 15.38 per 1,000 population as compared with 15.00 for England and Wales. The death rate relating to Newhaven residents was 9.22 per 1,000 population as against 11.70 for England and Wales for the same year. There was no maternal death of a Newhaven resident. The infantile mortality rate for the year was 16.95 per 1,000 live births for Newhaven, about two thirds of England and Wales rate of 24.90.

The average age at death relating to Newhaven was 71.6 years for the year.

There was a small number of cases of infectious diseases notified in 1955. The total amounted to forty composed of measles (18); scarlet fever (10); whooping cough (6); pneumonia (3); food poisoning (2); and puerperal pyrexia (1). For the second year in succession the number of measles cases was small. The food poisoning cases were suspected to be due to the consumption of infected and imported black pudding.

Seven cases of pulmonary tuberculosis were notified in Newhaven and one patient with this infection died in 1955.

Mr. Harrison, your Sanitary Inspector, carried out his duties with his usual keenness and tact throughout the year. He made a large number of housing inspections under the Public Health and Housing Acts. In other directions he maintained his high standard of inspections coupled with the usual considerable volume of work he gets through year after year in a most satisfactory manner to your Council and the public.

In conclusion, I have to thank you for your kind encouragement during the year and my thanks are also due to other officials for their help and courtesy. Mr. Harrison, your Sanitary Inspector, gave me valuable assistance.

I am, Ladies and Gentlemen,

Yours obediently,

G.M.DAVIDSON LOBBAN, M.B., Ch.B., D.P.H.,
F.R.S.I., etc.,

Medical Officer of Health.

SECTION I

Statistics for the Area -

1955

Area in Acres	1,766
Population (Estimated)	7,980
Rateable Value (Estimated)	£57,301
Sum represented by Penny Rate	£222
Number of occupied houses	2,427

Extracts from Vital Statistics

<u>Live Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>	
				<u>Crude Rates</u>	<u>Adjusted Rates</u>
Legitimate	61	56	117		
Illegitimate	1	-	1	14.79	15.38

Deaths

Including those of outside residents	63	60	123	15.41	14.17
Excluding those of outside residents	42	38	80	10.02	9.22

Rate per 1,000
Live and Still Births

Number of women dying in or in consequence of childbirth	0.00
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Rate per 1,000
Live Births

<u>Infantile Mortality</u> (deaths under one year of age)	2	-	2	16.95
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POPULATION.

The Registrar-General's estimated population figure for mid-1955 is 7,980. The population for Newhaven for the past 15 years is given below:-

<u>Year</u>	<u>Population</u>	<u>Vital Index</u>	<u>Year</u>	<u>Population</u>	<u>Vital Index.</u>
1941	4,993	114.6	1949	7,592	169.6
1942	5,129	142.6	1950	7,774	139.4
1943	4,939	135.8	1951	7,803	123.0
1944	5,232	166.1	1952	7,815	170.7
1945	5,523	160.2	1953	7,832	129.9
1946	6,388	214.4	1954	7,940	109.7
1947	6,726	190.8	1955	7,980	147.5
1948	7,520	161.7			

Population (Continued)

The estimated population figure for mid-1955 (7,980) shows an increase of 40 over the previous year's total of 7,940. It is the highest population figure ever recorded for the town and 1955 was the twelfth successive year in which an increase of population was noted. The increase, although not so great as that recorded last year, was higher than the average increase for a number of years past. The recorded deaths in Newhaven exceeded the births by six, but this was due to the inclusion in the total of recorded deaths of 43 deaths which occurred in a local institution, all of which related to persons not Newhaven residents. If these deaths are subtracted from the total, the recorded births exceeded the deaths of Newhaven residents by 38, and the vital index is 147.5 and as in former years is above 100.

The vital index shown in the table is arrived at by dividing the number of births during the year under review by the number of deaths, and multiplying the result by a hundred. The figure thus obtained is a measure of the population's biological condition as any such figure above a hundred shows that births in the area have more than compensated for the deaths which have taken place during the period. Similarly, any figure below a hundred shows that the reverse is the case and the position of the population is not biologically sound. Naturally, other factors, such as immigration into and emigration from an area, have a very considerable affect on the state of population, but the birth and death rates are the index of its biological condition.

Maternal Mortality.

No case of maternal mortality took place in the area during 1955.

Only one mother who was normally resident in Newhaven has died in, or in consequence of, childbirth during the past 20 years. In that time 2,445 births to resident mothers took place, and the maternal mortality rate per 1,000 live and still births for that period was 0.41 as against 2.57 for England and Wales.

Infantile Mortality.

During the year 1955 two infants under one year of age died in Newhaven. This represents a rate of 16.95 as compared with a rate of 24.9 per 1,000 live births for England and Wales. During the ten year period 1946-55 the infantile mortality rate has been reduced from 20.27 in 1946 to 16.95 in 1955 so far as Newhaven is concerned, whilst the equivalent figures for England and Wales are 43.0 in 1946 and 24.9 in 1955.

Birth Rate

The crude birth rate for the year under review was 14.79 per 1,000 population. This rate represents a drop of 0.83 compared with the rate for 1954 and continues the steady post-war decline which has taken place in the Newhaven birth rate. The rate for England and Wales for 1955 was 15.00.

An area comparability factor of 1.04 is applicable to the birth rate in the town. This factor is supplied by the Registrar General in order that a fair comparison may be made between the local birth rates of different districts and of England and Wales as a whole. In this case, its application gives an adjusted birth rate of 15.38, which is higher than that of 15.00 for England and Wales.

Population (Continued)

Death Rate

The crude death rate for the year under review was 15.41 per 1,000 population, the death rate for England and Wales for the same period being 11.70 per 1,000 population. The high death rate recorded is due in part to the decision of the Registrar-General that deaths of persons in certain types of institutions, which in the past have been credited to the areas in which the persons had lived prior to entering the institution, shall in future be shown as deaths of residents of the area in which the institution is situated. This means, in effect, that old persons from many parts of Sussex, and elsewhere, enter an institution in Newhaven, die there, and are shown in the annual returns as deaths accredited to Newhaven. It will thus be soon that the annual death rate for Newhaven is now heavily weighted. To offset this the number of persons who died in the institution and whose homes were outside Newhaven was subtracted from the total number of deaths, leaving the number of deaths of Newhaven residents.

An area comparability factor of 0.92 is applicable to the crude death rate of 15.41 per 1,000 and this gives an adjusted figure of 14.17 per 1,000 population. On applying the comparability factor to the death rate relating to Newhaven residents, the comparable death rate is 9.22 per 1,000 population, which figure is below the death rate for England and Wales, which was 11.70 per 1,000 population.

CAUSES OF DEATH.

	<u>Male</u>	<u>Female</u>	<u>Total.</u>
Heart disease	26	19	45
Circulatory diseases other than mentioned elsewhere	8	12	20
Cancer	7	7	14
Vascular lesions of nervous system	4	6	10
Bronchitis	4	2	6
Pneumonia	2	1	3
Nephritis and nephrosis	2	1	3
Diseases of respiratory system other than mentioned elsewhere	1	-	1
Influenza	1	-	1
Tuberculosis, respiratory	1	-	1
Ulcer of stomach and duodenum	-	1	1
Gastritis, enteritis & diarrhoea	-	1	1
Hyperplasia of prostate	1	-	1
Motor vehicle accident	-	1	1
All other accidents	-	1	1
Other defined & ill-defined diseases	6	8	14
	63	60	123

Section I (Continued)

The highest age at death was 99 years

The lowest age at death was 5 days

The average age at death of
Newhaven residents was 71.6 years

SPECIFIC CAUSES OF DEATH

Heart disease and diseases of the Circulatory System.

Over one half of the total number of deaths in the area during 1955 were due to heart disease and diseases of the circulatory system. Most of them occurred amongst elderly people. As has been mentioned in previous reports, the greater number of these deaths were due to the heart wearing out after giving between seventy and eighty, or even more, years of service.

Cancer

Fourteen deaths due to cancer took place during 1955, the same number as in 1954, giving a death rate of 1.75 per 1,000 population. This compared favourably with the rate for England and Wales for the same period, which was very slightly above 2 per 1,000.

Vascular lesions of the nervous system.

Vascular lesions of the nervous system include cerebral haemorrhage, cerebral embolism and thrombosis and other cerebral lesions. A total of ten deaths in Newhaven was classified under this heading during 1955, four being males and six females. This is three less than last year's total of thirteen deaths and four less than the total of fourteen recorded in 1953. Most of these deaths occur amongst elderly persons and a good proportion of them take place in an institution in the area to which elderly and infirm people are sent from surrounding areas as well as from Newhaven district.

Bronchitis

Six deaths due to bronchitis occurred in the Urban District during 1955, a higher figure than is usually recorded. This illness may be caused by exposure, or may follow a cold, tonsillitis or laryngitis. It may also be associated with influenza, measles or whooping cough. In old people it may be associated with heart disease, kidney disease or pneumonia. Both acute and chronic bronchitis need medical supervision.

SECTION II

General Provision of Health Services in the Area

1. Public Health Facilities of the Local Authority

During the period under review the Medical Officer of Health for Newhaven also acted as Medical Officer of Health for the Borough of Lewes, the Urban District of Seaford and the Rural District of Chailey.

One Sanitary Inspector carries out duties in the Urban District of Newhaven.

2. Laboratory Facilities

The Public Health Laboratory, established at the Royal Sussex County Hospital, Brighton, has proved of great assistance during the year.

The Laboratory has carried out for the Urban District, free of charge, the examination of sputum of laryngeal swabs and faeces and has also examined samples of water. Altogether the Laboratory carried out 33 different examinations for the Urban District during the year under review. This service is extremely valuable both to your Medical Officer of Health and to the medical practitioners practising in the district.

3. Ambulance Facilities

The provision of the ambulance service is the responsibility of the East Sussex County Council, which has made arrangements for the ambulance to be housed, serviced, and maintained by a local commercial garage, and for the vehicle to be driven by members of the garage staff. Members of the St. John Ambulance Brigade act as attendants. The area served by the ambulance includes the districts of Newhaven, Peacehaven, Telscombe, Piddinghoe, Tarring Neville, and South Heighton. In the event of a further call or calls being received before the ambulance has returned from a previous call, arrangements are in being for the call to be dealt with by other authorities in the area.

The Newhaven ambulance is not available for the transport of infectious disease cases but under the provisions of the Ambulance Scheme ambulances from adjacent ambulance stations can be called upon, if required, for the conveyance of infectious disease cases. Arrangements are in being for the disinfection of ambulances so used, together with the disinfection of bedding, clothing, etc.

The East Sussex County Council provide facilities for the transport of tuberculosis patients.

4. Hospitals

Under the provisions of the National Health Service Act, 1946, the Ministry of Health is responsible for the provision of hospital accommodation which, in this area, was materially the same as in previous years.

Section II (Continued)

5. Nursing in the home

As in previous years, the East Sussex County Council, as empowered by Section 25 of the National Health Service Act, 1946, has arranged for this service to be provided by the East Sussex County Nursing Association through the Lewes and District Nursing Association.

6. Clinics

The Minor Ailments Clinics have been held at the Schools as previously, and immunisation clinics have also been held monthly in the town.

7. Institutional Provision for the Care of Mental Defectives

The East Sussex County Council deals with the Lunacy and Mental Deficiency services in respect of patients outside institutions. All institutional care is the responsibility of the Regional Hospital Board.

SECTION III

SANITARY CIRCUMSTANCES & SANITARY INSPECTION OF THE AREA

1. Water Supply.

The District has two sources of water supply:-

- (a) from the Newhaven and Seaford Water Company which obtains water from a well sunk into the chalk at Poverty Bottom; and
- (b) from the British Railways' well at Denton. This supply is only provided for four houses and two hotels, viz. 1 - 4 Denton Terrace, The Railway and Harbour Hotels.

2. Closet Accommodation.

All the premises in the district are provided with closets connected with the sewer with the following exceptions:-

Premises with cess-pools

West Pier	2
Court Farm Road	10
Harbour Heights Estate	46
Added Area	277
Lewes Road	7

Premises with earth closets

New Road	15
Denton Village	8

3. Scavenging

A weekly collection of refuse was made from all premises in the area which were within fifty yards of a reasonably accessible road. House refuse was disposed of by the Bradford Tipping System, buried daily on the Council's Refuse Tip on Denton Island. This system of disposal has proved to be satisfactory.

4. The following is a list of the number and nature of inspections carried out during the year by your Sanitary Inspector

Housing

Inspections under the Public Health Acts	113
Visits under the Public Health Acts	130
Inspections under the Housing Acts	76
Visits under the Housing Acts	103
Inspections of verminous houses	10
Inspections under Housing Repairs & Rents Act	10

Infectious Diseases

Enquiries	16
Disinfections	15

General Sanitation.

Ditches	7
Drainage	100
Stable and Piggeries	27
Fried Fish Shops	53
Factories and Workshops	41
Bakehouses	38
Public Conveniences	74

Section III (Continued)

General Sanitation.

Refuse Collection	98
Refuse Disposal	26
Rats and Mice	69
Shops	70
Tents, Vans and Camping Sites	76
Miscellaneous Visits	123

Meat and Food Inspections

Butchers	83
Fishmongers	39
Grocers	68
Dairies	80
Ice-cream premises	85
Restaurants	85

Summary of Work after Service of Notice

Roofs repaired	8
Eavesgutter of fallpipes repaired	9
Dustbins	34
Pointing or rendering of external walls	8
Water closets or cisterns repaired or renewed	12
Drains relaid, improved, or cleared	13
Dampness remedied	11
Chimney stacks repaired	3
Kitchen sinks renewed	2
Ventilated food stores provided	2
Means of ventilation improved	4
Windows and sashes repaired	12
Cooking stoves repaired or renewed	3
Firegrates or flues repaired	2
Floors (wood or solid) repaired or relaid	4
Doors repaired or renewed	6
Wallplaster repaired	7
Ceilings repaired	3
Decoration of premises	2
Accumulation of refuse removed	2
Dirty premises cleansed	1

5. Inspections of Shops and Offices

Shops and Offices were regularly inspected and, with the exception of minor items, were found to be satisfactory.

6. Eradication of Bed Bugs

Number of houses infested ... Council houses Nil
Other houses Nil

7. Premises Controlled by Bye-Laws and Regulations.

(a) Clean Food Byelaws are in force, made under Section 15 of the Food and Drugs Act, 1938.

(b) Dairies During the year the Sanitary Inspector made 80 dairy inspections. There are 16 retailers in the district registered for the sale of milk.

(c) Slaughter of Animals. There are no Slaughterhouses in the district. Fresh meat is obtained principally from Slaughter houses and Markets in Brighton and Chailey.

There is one licensed Slaughterman in the area.

7. Premises Controlled by Bye-Laws and Regulations (Continued)

(d) Milk Supply The premises from which milk is supplied to the District retail received special attention.

(e) Other foods All premises where food is prepared for sale were inspected regularly and their condition proved to be reasonably satisfactory except for some minor details which were made good on informal notice. There were four bakehouses in the district, all of which were above ground.

8. (a) Unsound Food.

The following foodstuffs were found to be unsound and were condemned and suitably disposed of:-

	Cwt.	Qrts.	Lbs.
Meat and Offal		2	2
Meat (Tinned-Variou)		2	1
Fruit (Tinned-Variou)		2	17
Vegetables (Tinned Various)		1	4
Fish (Tinned Fresh)		1	3
Miscellaneous		1	21
	2	2	20

The main causes of condemnation were decomposition due to piercing of containers by nails or hooks, or failures in processing of tinned goods.

9. Factories Act, 1937

In the Urban District of Newhaven there are 10 factories on the Register in which Sections 1, 2, 3, 4, 6, and 7 of the above Act are enforced, and 41 factories in which Section 7 only is enforced.

During 1955, 41 inspections were carried out. Details are as follows:-

Part I of the Act.

Inspections for purposes of provisions as to health (including inspections made by Sanitary Inspector.)

Factories Acts, 1937 & 1948

1. Inspections for purposes of Provisions as to Health
(Including inspections made by S.I.).

Premises	Number on Register	Inspections	Written Notice	Occupiers Prosecuted
1. Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by Local Authorities	10	7	Nil	Nil
2. Factories not included in 1. in which Section 7 is enforced by the Local Authority	41	34	2	Nil
3. Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	2	Nil	Nil	Nil
T O T A L	53	41	2	Nil

2. Cases in which defects were found

<u>Particulars</u>	<u>Found</u>	<u>Remedied</u>	<u>Referred to H. M. Inspector</u>	<u>Referred by H.M. Inspector</u>	<u>No. of cases in which prosecutions were instituted</u>
Sanitary Conveniences (S.7.)					
Unsuitable or defective	1	1	-	-	-
Not separate for sexes	1	1	-	1	-
TOTAL	2	2	Nil	1	Nil

SECTION IV

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS & OTHER DISEASES.

In all 40 cases of infectious disease, excluding tuberculosis, were notified in Newhaven during 1955. The details are as follows:-

Incidence of Notifiable Infectious Diseases (excluding Tuberculosis) during the year 1955

Disease	Cases Notified.	Cases Admitted to Hospital.	Deaths
Measles	18	-	-
Whooping Cough	6	-	-
Scarlet Fever	10	5	-
Pneumonia	3	-	-
Food Poisoning	2	-	-
Puerperal Pyrexia	1	-	-
T O T A L	40	5	-

Measles

For the second year in succession only a very small number of cases, namely 18, was notified in Newhaven during 1955.

All of the cases were treated at home and made rapid and uneventful recoveries.

Now that a vaccine has been developed to give at least partial immunity against whooping cough, measles is the most prevalent of childhood complaints. In the past it has also been one of the most troublesome, particularly since scarlet fever has diminished both in prevalence and virulence. Now, however, the use of penicillin and other anti-biotics and of the sulpha drugs has reduced the danger from the complications of broncho-pneumonia or damage to the patient's ears or eyes.

Whooping Cough

Only six cases of whooping cough were notified in Newhaven during the year under review, representing 15 per cent of all the notifications of infectious disease received during the year. Although this figure is considerably less than the figures for 1954 and 1953, which were 66 and 41 cases respectively, it is too early yet to decide whether or not this is due to the introduction in the County on 1st April, 1954, of vaccination against whooping cough. Should a comparatively small number of cases of whooping cough occur in the town during each of the next few years, then it will be reasonable to assume that vaccination against the disease has produced results. The occasional year of light incidence is, however, no new phenomenon and a number of such years in succession must occur before a permanent alteration in incidence can be assumed.

49.

Section IV (Continued)

Scarlet Fever

Ten cases of scarlet fever were notified in the Urban District during the year under review, five of which were admitted to hospital. All of the cases were mild and admissions to hospital were only made in order to avoid the possibility of the patients in question spreading further infection.

It is very important that the disease should be recognised and the patient segregated as early as possible as the period of infectivity begins very early in the attack. The patient should be isolated, contacts excluded from school and in particular infected persons and recent contacts should be precluded from handling milk and milk products.

Pneumonia

Only three cases of pneumonia were notified during the year under review. None of the cases were admitted to hospital and all made satisfactory recoveries.

Food Poisoning

Two unrelated cases of food poisoning were recorded in the District during 1955. In one case the cause of the infection was suspected to be a portion of black pudding. It was not possible to trace the cause of the other case. It cannot be too greatly emphasised that a very large proportion of all cases of food poisoning are caused by the careless, unhygienic habits of a food handler. The greatest of care should be taken by all who handle food, either in the home, canteen, restaurant, shop or factory, to ensure that their hands and clothes are clean and uncontaminated, and that the food handled is kept absolutely free from outside contamination and, in the home, canteen and restaurant, is eaten as soon as possible after preparation.

Puerperal Pyrexia

One case of puerperal pyrexia was notified in Newhaven during 1955. This represents a very low rate of incidence. These cases are very rare nowadays, due to better management of pregnant mothers, to improvements in the conduct of childbirth and of the care of mothers immediately after childbirth.

General.

Of the total of 40 cases of infectious disease which were notified in Newhaven during 1955, 34 were of measles, whooping cough or scarlet fever.

It is hoped that the introduction of vaccination against whooping cough will eventually lead to the control of that malady. For a number of years past both the virulence and incidence of scarlet fever have declined. This leaves measles as the major problem amongst the common infectious diseases and it is unfortunate that there is at present no vaccine which is capable of giving prolonged immunity from the disease. On the brighter side however, penicillin and the sulpha drugs prevent many of the distressing complications which are more to be feared than the disease itself and which in the past often left the patient with a permanent disability and, what was more serious, caused considerable mortality.

SECTION V

In 1955 seven new cases of pulmonary tuberculosis were notified. No new case of non-pulmonary tuberculosis was reported. During the same period one death due to pulmonary tuberculosis was recorded. No death from non-pulmonary tuberculosis occurred. Details are given in the following table.

1955 New Cases and Mortality.

Age Period	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0	-	-	-	-	-	-	-	-
1	-	-	-	-	-	-	-	-
5	-	-	-	-	-	-	-	-
10	-	1	-	-	-	-	-	-
15	-	1	-	-	-	-	-	-
20	-	2	-	-	-	-	-	-
25	-	2	-	-	-	-	-	-
35	-	-	-	-	1	-	-	-
45	-	1	-	-	-	-	-	-
55	-	-	-	-	-	-	-	-
65 & upwards	-	-	-	-	-	-	-	-
T O T A L	-	7	-	-	1	-	-	-

The incidence per 1,000 population of the seven new cases of pulmonary tuberculosis notified in 1955 is 0.88.

The single death due to pulmonary tuberculosis which occurred in the Urban District during 1955 shows a death rate of 0.12 per 1,000 population. This is very slightly less than the rate for England and Wales for the same year, which was 0.13 per 1,000.

It would appear that the vastly improved methods of prevention, detection and treatment of this disease are having a considerable effect and are rapidly reducing the mortality rate of tuberculosis.

The Mass Miniature Radiography Units which have been established throughout the country have done excellent work in detecting cases of tuberculosis which might otherwise have gone undiscovered for many months, during which time the persons concerned might have spread the disease amongst others in their homes, offices or workshops.

Section V (Continued)

The Directors of these units are now focussing their energies towards finding those sections of the population in which the largest numbers of cases of tuberculosis may be found.

The East Sussex Mass Radiography Unit carried out a survey in Newhaven from the 31st May to 7th June, 1955, inclusive, in the course of which 1,116 persons were X-rayed. Two cases of active pulmonary tuberculosis were discovered as a result of the Survey, together with fifteen cases of inactive pulmonary tuberculosis. In thirteen persons other diseases of the lung or pleura were traced and in five cases cardio-vascular disease was found to be present.

